

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No.  
Applicant's  
Filing Date

10/580,066

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	/					
2	/						52	/					
3							53	/					
4	3						54	/					
5	(1)						55	/					
6	(1)						56	/					
7	(1)						57	/					
8	(1)						58	/					
9	(1)						59	/					
10	(1)						60	/					
11	(1)						61	/					
12	(1)						62	/					
13	(1)						63	/					
14	(1)						64	/					
15	(1)						65	/					
16	(1)						66	/					
17	(1)						67	/					
18	(1)						68						
19	(1)						69						
20	(1)						70						
21	(1)						71						
22	(1)						72						
23	(1)						73						
24	(1)						74						
25	(1)						75						
26	(1)						76						
27	(1)						77						
28	(1)						78						
29	(1)						79						
30	(1)						80						
31	/						81						
32	/						82						
33	/						83						
34	/						84						
35	/						85						
36	/						86						
37	/						87						
38	/						88						
39	/						89						
40	/						90						
41	/						91						
42	/						92						
43	/						93						
44	/						94						
45	/						95						
46	/						96						
47	/						97						
48	/						98						
49	/						99						
50	/						100						
TOTAL IND.			↓		↓		TOTAL IND.	2	↓	↓	↓	↓	
TOTAL DEP.			←		←		TOTAL DEP.	35	←	←	←	←	
TOTAL CLAIMS							TOTAL CLAIMS	37					